

**N.H. EMERGENCY MEDICAL & TRAUMA SERVICES
COORDINATING BOARD**

Richard M. Flynn Fire Academy

APPROVED MINUTES OF MEETING

January 18, 2007

Members Present: Steve Achilles (Chair), Dave Dubey, Janet Houston, Don Johnson, Terry LeBlanc, Doug Martin (Vice Chair), Michael Pepin, Suzanne Prentiss

Members Absent: Eileen Bartlett, Diane Becker, Al Burbank, David Duquette, David Hogan, Ken Howe, Karen Lord, Rick Mason, Joseph Mastromarino, Jackie Normile, George Patterson, John Sutton

Guests: Christine Beres, Jonathan Dubey, Jeanne Erickson, Steve Erickson, Dave Tauber, Gary Zirpolo

Bureau Staff: Vicki Blanchard, Kathy Doolan, Eric Perry, Fred von Recklinghausen

I. CALL TO ORDER

Item 1. The meeting of the EMS & Trauma Services Coordinating Board was called to order at 1:05 PM by Chairman Steve Achilles, on January 18, 2007 at the Richard M. Flynn Fire Academy in Concord, NH. He took a moment to thank everyone for coming to the last meeting, and welcomed D. Martin as the Vice Chair elected at that meeting.

Rules of the meeting were discussed under the new Chairman: expected to stick to the agenda – time is valuable. Meeting is open to anyone and action is encouraged. Reminder that this Board is advisory. S. Achilles & D. Martin are accessible to everyone, one of them will plan to attend the MCB meeting each time in order to answer questions.

II. ACCEPTANCE OF MINUTES – S. Achilles asked for comments on minutes. D. Dubey made a motion to accept the minutes as written, D. Martin seconded the motion and all approved.

III. DISCUSSION ITEMS

Item 1. NHEMS Medical Control Board Report: J. Mastromarino was not present to give the report from the morning meeting. V. Blanchard & S. Prentiss gave an overview of the protocol changes that were discussed. A new cyanide antidote has been approved and will be included in the protocols ASAP. RSI discussion took place along with a summary of the past 17 months of successes, failures and observations – there is an interest from some physicians that the program be expanded, not widely but as effective.

Item 2. NHBEMS Report: S. Prentiss, Bureau Chief gave a summary update on all Bureau projects currently underway and referred members and guests to the written report available in the folders and on the side table.

Special attention was brought to the following:

EMS Community news – The group was informed about the recent death of EMT-B student Jenny Harman on the night of her NR exam. A certificate from the NR will be presented posthumously by the Division to her family.

D. Dow's health status was mentioned along with the information concerning his past position being filled was presented.

F. v Reckinghausen has taken a position as Trauma Program Manager at Dartmouth and will be leaving the Division in March – he will stay on part time until the person filling his position is settled.

C. Rousseau who was part time and coordinating the Instructor Program has taken a full time position with the Fire Academy and will be overseeing Fire/EMS Instructors.

Protocols will be out soon.

Instructor class is working out well.

EMS Field Training Programs are moving along. Two have been completed and some issues are being fixed. Others are being planned for 2007.

TEMSIS – 80+ percent of the Units are reporting and 90 percent of those are the transporting Units.

Portable DNR program is in place as of Jan. 1, 2007 (RSA 137-J). It is utilizing a standardized form and process. We will be presenting the information during the Protocol Rollout sessions. A reminder that the option to call Medical Control is always in place if a question arises on-scene.

Paramedic Vaccination Program is moving along, V. Blanchard is the lead/contact on the program.

Quality Management project (next meeting 1/22/07) will be transitioned to the new Research person and has been broken out into three action groups.

CBT is up and running, a few new sites are in process and should be on-line soon. They will take the place of two locations that fell through at the last moment.

Phil Dickeson resigned from the National Registry at the end of December – he was a huge help to NH EMS and will be sorely missed. The Director and Bureau Chief sent letter to the National Registry acknowledging this loss.

First Responder “Bridge” process is being fleshed-out and a first draft will be available to this Board in early spring.

Preparedness – the EMS Strike Teams are in process of being established.

Rural AED – the courtesy upgrade of grant machines is ongoing.

IFTE (Inter-facility transfer Exception) Program – Two more CCRN’s have licensed after taking the program.

Trauma System – Conference was held and 24 out of 26 NH hospitals were represented.

(Please refer to the written report for all Bureau updates)

Item 3. National Registry policy update – E. Perry reported on a newly approved policy from NR in which they would take successful completion of a NR written exam in place of a refresher training program and continuing education by a reregistering candidate. This option would only be offered for one sitting at the written and if the candidate failed, they would have to follow the currently approved process of CE and RTP. A handout was given to the group.

This new policy was publicized by NR but NH EMS was unaware of this option. The question was put to the membership concerning if NH should accept this level of “refreshing” or establish it’s own policy for NR to follow? We need an answer for Providers.

The Bureau Chief mentioned that alternatives to refresher process have been ongoing, many have not worked out well but the Division does have the option to approve alternatives. Extensive discussion ensued including discontent with NR just pushing this policy forward. The Bureau Chief stated that she had had a conversation with the Registry and they stated that it had been approved at a meeting in November and then posted on their web site. She reminded them that

she does not monitor that web site. Concern was raised that if we created our own process – the Bureau Staff would be taxed to oversee it. Many agreed that they could see the written option replacing the refresher course but not the continuing education hour requirement. It was mentioned that this type of an option was available in the nursing field. After opinions and concerns were aired, S. Achilles asked for a vote (by hands) for who thinks we should accept the policy as written and then discuss it further when results are summarized for the period of January to March 2007, or who thinks that we should not approve it and stay with the current process, informing NR to follow our policy. 2 members present voted to approve the new policy and 5 members voted to stay with the current process. This will be the recommendation forwarded to the Bureau. The group will dedicate time on the March agenda to this topic.

Item 4. Paramedic Pediatric Issue revisited – J. Houston passed around a handout of a survey that is to be sent out to all Paramedics licensed in the state to find out what EMT-P level Providers have for courses in pediatric care. Discussion about a future, follow-up survey to see what Paramedics feel is appropriate and necessary for CE in pediatric care. A web based survey was also discussed to get input from hospitals on pediatric transfers, input was taken from the Inter-facility transfer committee.

Side Note: S. Achilles mentioned that a course on EMS/Fire scene rehab will be run at the Mt. Sunapee Conference this spring.

Item 5. Accidental Exposure/Blood Draws/Status Report – D. Johnson reported that as he looks into this further it is very complex. Responses were received from 15 states via a questionnaire sent out to State Directors by S. Prentiss, and the Hospital Association also has responded via T. Leblanc. The PFFNH had an informal response to the topic also.

The question was raised about this Boards interest in pursuing this further?

T. Leblanc reported that DHHS is very supportive, and she had just found out that DHHS has a Bills pending concerning this. T. Leblanc discussed the issue with the sponsor of the Bill and the possibility of adding in EMS to the wording. She also asked if it would be helpful to have additional support from EMS constituents. The Bureau Chief will look into the pending Bill further and forward information to the group as appropriate. S. Achilles mentioned that this Board cannot bring forward language to a Bill but can disseminate information to organization, encouraging them to attend hearings.

Item 6. Institute of Medicine Report (IOM) – S. Prentiss handed out a synopsis of the report that C. Odell had compiled. She also reported that there may be some funding available for demonstration projects. Some points within the summary are as follow:

- common scope of practice
- recognition of national certification
- accreditation for Paramedic Programs
- Workforce issues- rural Units associate w/ Academic Institutes
- Disaster Preparedness – education standards

S. Achilles spoke on the large number of issues that need to be addressed and asked the Board if representatives would step forward to work with C. Odell to prioritize them. (Ex: this is what we are doing, these need enhancement, these need attention) J. Houston thought it important to look at these issues via a subgroup and reorganize the partnerships – collaborate with others (DHHS, DHMC etc.) Anyone interested should let K. Doolan know at the end of the meeting. (D. Johnson volunteered)

Item 7. Trauma Review Committee Update – S. Prentiss gave the update as J. Sutton and C. Odell were not in attendance. She mentioned that Androsgogin Valley Hospital and The Memorial Hospital are in the process of updating their Trauma systems. Also, the “SIM” man scenarios for training at hospitals are in process of being completed. J. Houston added that CHAD has purchased a “SIM” child for training the EMS community and are in process of making a plan for use.

Item 8. Items of Interest:

F. v Reclinghausen gave a presentation on the Strategic Highway Safety planning underway and explained that EMS now has a focus area within the plan. He handed out goals that the sub-committee is working on and explained that he will be working on this plan while in his part time status with the Division and that the Bureau Chief will be kept involved. The powerpoint will be sent out to the CB members via e-mail.

S. Achilles brought up the topic of the recent “Public Safety Death Benefit” Bill that is in process and mentioned that it was going to be amended to include EMS, private and third Service.

S. Achilles mentioned that at the Region III meeting TEMSIS was discussed and issues that are arising with Services not leaving a drop-off form and that some Services are not allowing providers to stay at the hospital and complete the TEMSIS process. He asked the group if this was an issue elsewhere and discussion ensued. The question was raised if the number of hours listed in the EMS rules needed to be changed to shorten the 24 hour requirement. Also

mentioned was that the “Medical Resource Hospital Agreement” could outline more restrictive requirements. Legal issues and liabilities surrounding the hospital not having documentation of patient care by the prehospital Service becomes the problem. The Bureau Chief suggested that the Bureau work on this with the Hospital Coordinators group. A recommendation of a maximum 2 hours lapse time was suggested.

K. Doolan handed out a list of the 2007 MCB and CB meeting dates noting that the July and September dates need locations for the meetings as they are typically “on the road”.

IV. ADJOURNMENT

Motion was made by D. Martin and seconded by D. Johnson to adjourn. Unanimous agreement and meeting was adjourned at 3:05 PM.

V. NEXT MEETING

The next meeting will be on **March 15, 2007 at 1:00 PM** at the NH Fire Academy in Concord, NH.

Respectfully Submitted,

Suzanne M. Prentiss, Bureau Chief, EMS
(Prepared by K. Doolan, Field Services Coordinator)